PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

099986 74

		CLAIMS AS	Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							1	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
ТС	TAL CHARGEA	BLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=	
INE	EPENDENT CL	AIMS	mi	nus 3 =	*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							Ì	+140=		OR	+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" i			olumn 2	ı	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	
l		(Column 1) CLAIMS	(Column 2) HIGHEST			(Column 3)	-	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***]=		X42=		OR	X84=	
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		1	+280=	
							L	TOTAL		OR	TOTAL	
			. 4	ADDIT. FEE		OR	ADDIT. FEE					
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST											
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	·
AME	Independent	*	Minus	***				X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
										OR	TOTAL	
		Α	ADDIT. FEE			addit. Fee i						
		(Column 1) CLAIMS		(Colur HIGH	EST	(Column 3)	Г	····	ADDI-	l	7	ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NDM	Total	*	Minus	**	,	=		X\$ 9=		OR	X\$18=	
AME.	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										605	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pai	d For" (Total or	Independ			r four	nd in the app	ropriate box	(in col	umn 1.	
FORM	PTO-875 (Rev. 8/0	PESI A	****		U.S.GPO:2001	482-124 / 59197	Pate	nt and Tradem	ark Office, U.	S. DEF	PARTMENT OF	COMMERCE